

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018**SUNDRY NOTICES AND REPORTS ON WELLS**
*Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.***SUBMIT IN TRIPLICATE - Other instructions on page 2**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM123532
2. Name of Operator COG OPERATING LLC		6. If Indian, Allottee or Tribe Name
Contact: MAYTE REYES E-Mail: mreyes1@concho.com		7. If Unit or CA/Agreement, Name and/or No.
3a. Address ONE CONCHO CENTER 600 W ILLINOIS AVENUE MIDLAND, TX 79701-4287	3b. Phone No. (include area code) Ph: 575-748-6945	8. Well Name and No. BASEBALL CAP FEDERAL COM 608H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 25 T24S R34E SWSW 340FSL 970FWL 32.182137 N Lat, 103.429108 W Lon		9. API Well No. 30-025-45787-00-X1
		10. Field and Pool or Exploratory Area WILDCAT BONE SPRING
		11. County or Parish, State LEA COUNTY, NM

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Hydraulic Fracturing	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Change to Original A
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	PD

13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomple horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

COG Operating LLC, respectfully requests approval for the following changes to the original APD.

BHL Change

From: 200' FNL & 330' FEL Section 24. T24S. R34E
To: 200' FNL & 330' FWL Section 24. T24S. R34E.

14. I hereby certify that the foregoing is true and correct. Electronic Submission #459937 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Hobbs Committed to AFMSS for processing by PRISCILLA PEREZ on 04/08/2019 (19PP1523SE)	
Name (Printed/Typed) MAYTE REYES	Title SENIOR REGULATORY ANALYST
Signature (Electronic Submission)	Date 04/02/2019

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By <u>ZOTA STEVENS</u>	Title <u>PETROLEUM ENGINEER</u>	Date <u>04/23/2019</u>
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.		Office Hobbs

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

**** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ****

K9

Revisions to Operator-Submitted EC Data for Sundry Notice #459937

	Operator Submitted	BLM Revised (AFMSS)
Sundry Type:	APDCH NOI	APDCH NOI
Lease:	NMNM123532	NMNM123532
Agreement:		
Operator:	COG OPERATING LLC 2208 W MAIN STREET ARTESIA, NM 88210 Ph: 575-748-6940	COG OPERATING LLC ONE CONCHO CENTER 600 W ILLINOIS AVENUE MIDLAND, TX 79701-4287 Ph: 432.685.4342
Admin Contact:	MAYTE REYES SENIOR REGULATORY ANALYST E-Mail: mreyes1@concho.com Ph: 575-748-6945	MAYTE REYES SENIOR REGULATORY ANALYST E-Mail: mreyes1@concho.com Ph: 575-748-6945
Tech Contact:	MAYTE REYES SENIOR REGULATORY ANALYST E-Mail: mreyes1@concho.com Ph: 575-748-6945	MAYTE REYES SENIOR REGULATORY ANALYST E-Mail: mreyes1@concho.com Ph: 575-748-6945
Location:		
State:	NM	NM
County:	LEA	LEA
Field/Pool:	WILDCAT; BONE SPRING	WILDCAT BONE SPRING
Well/Facility:	BASEBALL CAP FED COM 608H Sec 25 T24S R34E SWSW 340FSL 970FWL	BASEBALL CAP FEDERAL COM 608H Sec 25 T24S R34E SWSW 340FSL 970FWL 32.182137 N Lat, 103.429108 W Lon

DISTRICT I
1000 N. FRANKLIN DR., DOWNS, NM 87840
Phone: (505) 820-4181 Fax: (505) 820-0780

DISTRICT II
811 E. FIRST ST., ARTERIA, NM 88210
Phone: (505) 748-1883 Fax: (505) 748-9720

DISTRICT III
1000 RIO BRAZOS RD., AZTEC, NM 87410
Phone: (505) 334-6178 Fax: (505) 334-6170

DISTRICT IV
1000 E. ST. FRANCIS DR., SANTA FE, NM 87505
Phone: (505) 476-3480 Fax: (505) 476-3482

State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
1220 SOUTH ST. FRANCIS DR.
Santa Fe, New Mexico 87505

Form C-102
Revised August 1, 2011
Submit one copy to appropriate
District Office

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-025	Pool Code	Pool Name Wildcat; Bone Spring
Property Code	Property Name BASEBALL CAP FEDERAL COM	Well Number 608H
OGRID No. 229137	Operator Name COG OPERATING, LLC	Elevation 3423.8

Surface Location

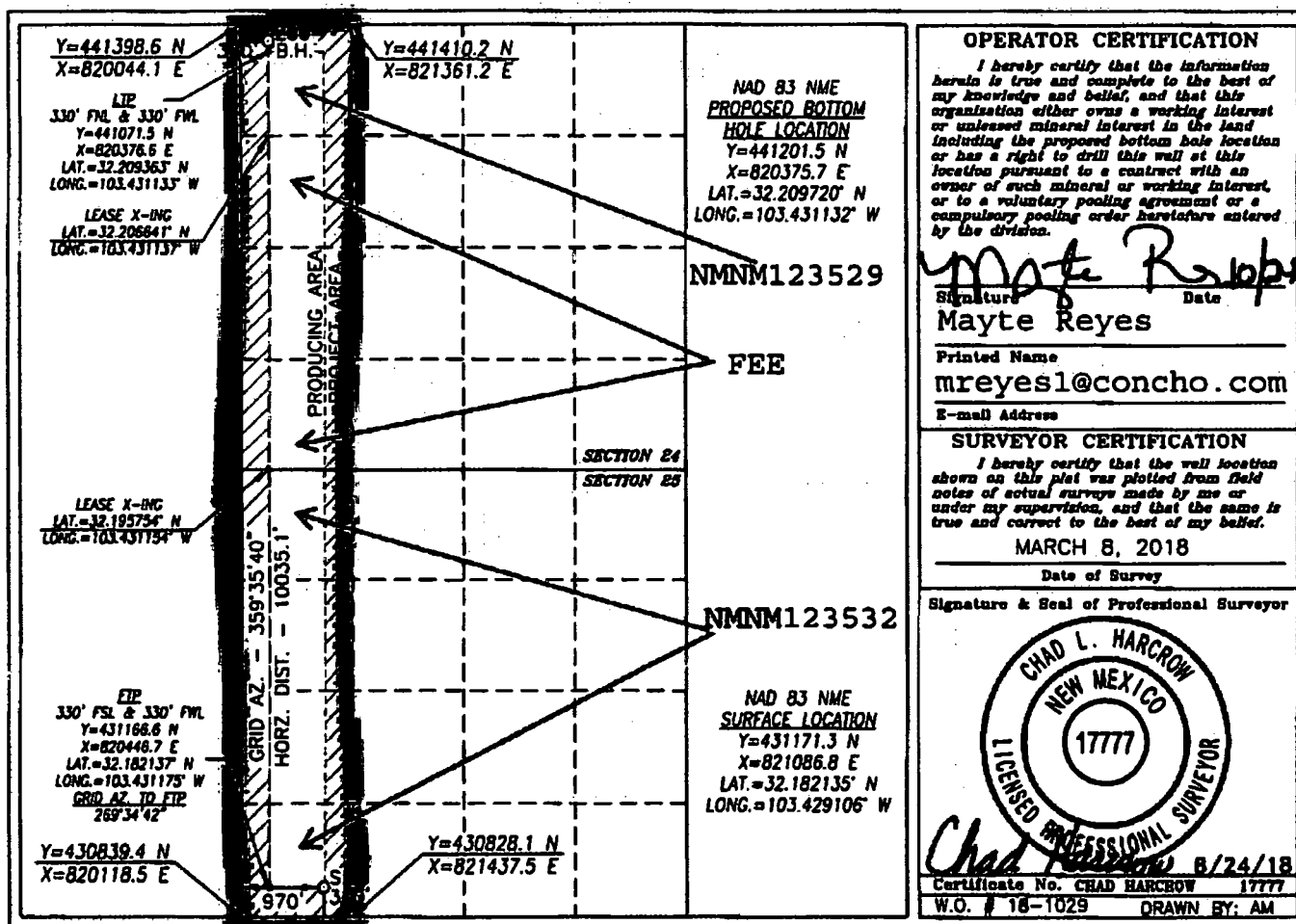
UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
M	25	24-S	34-E		340	SOUTH	970	WEST	LEA

Bottom Hole Location If Different From Surface

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
D	24	24-S	34-E		200	NORTH	330	WEST	LEA

Dedicated Acres	Joint or Infill	Consolidation Code	Order No.
320			

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION



OPERATOR CERTIFICATION

I hereby certify that the information herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unless mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

Signature: *Mayte Reyes* Date: *11/18*
Printed Name: **Mayte Reyes**

E-mail Address: **mreyes1@concho.com**

SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.

MARCH 8, 2018

Date of Survey

Signature & Seal of Professional Surveyor



Certificate No. **CHAD HARCROW 1777**
W.O. # 18-1029 DRAWN BY: AM

